

March 16, 2021

Senator Janet Buckner
Representative Leslie Herod
Senate Health and Human Services Committee Members

Dear Senator Buckner, Representative Herod, and Members of the Senate Health and Human Services Committee:

Physicians for Reproductive Health (PRH) is a physician-led national advocacy organization that works to improve access to comprehensive reproductive health care, including care during pregnancy, labor, and delivery, as well as postpartum care. Our network includes physicians of all specialties from across the country committed to meeting the reproductive health care needs of the patients they serve.

We believe every Coloradan should have access to the comprehensive maternal health care they need and write in strong support of Colorado's Birth Equity Legislative Package. The existing inequities that Black and Indigenous people face during the perinatal period is untenable, and our maternal health system is failing. The United States is the [only country](#) where [maternal mortality is rising](#), yet we spend more money and resources on worse outcomes than any other developed nation. Black, Indigenous, and other people of color are still [facing higher rates of mortality, morbidity, and mistreatment](#) compared to white people. And the data continually suggests that these existing and ever increasing disparities are largely related to [systemic racism](#). Black women and infants [experience racism](#) throughout their perinatal care, and one out of every three patients [report](#) dealing with blatant disrespect when receiving this essential care. Colorado's Birth Equity Package would work to correct these injustices by improving perinatal care and addressing existing health inequities to improve maternal health outcomes in the state.

[The Direct Entry Midwives Sunset 2021 Act](#), is part of an innovative multifaceted approach to addressing inequities during the perinatal period and would align Colorado with over 30 states and the District of Columbia that currently license Certified Professional Midwives. Importantly, the Direct Entry Midwives Sunset 2021 Act would add licensed birth centers to the locations where a direct-entry midwife may practice. There are [three professional designations for midwives in the United States](#): Certified Nurse-Midwives (CNM), who are trained in both nursing and midwifery typically in a hospital based setting, and Direct-Entry Midwives who receive training primarily outside of hospital settings, including Certified Midwives (CM), who are typically individuals who have a health related background other than nursing in addition to midwifery education and Certified Professional Midwives (CPM), whose education focuses on providing midwifery model care in homes and birth centers. All three professional designations involve [significant training and certification](#). Expanding access to direct-entry midwives, especially those who are part of the communities they support, can significantly improve the health and birthing outcomes of patients. [Data shows](#) that midwives are [directly associated](#) with improved maternal health outcomes and lower rates of medical intervention.

As physicians we fully support an integrated maternity care system where patients are able to get the full range of essential maternal health care and respect their decision about their birth attendants and place of delivery.

The second bill in Colorado's Birth Equity Package, [Protections for Pregnant People who are Pregnant During the Perinatal Period](#), would provide important protections for pregnant people, including those who are incarcerated. Although Colorado passed legislation years ago to prohibit the shackling of people who are incarcerated, inhumane conditions, human rights violations, and injustices remain. This bill would address harmful restraint practices of pregnant individuals by, among other things, requiring each facility that incarcerates people who can become pregnant to: provide training to staff to ensure that a pregnant person receives safe and respectful treatment; ensure pregnant people receive trauma informed care; provide access to perinatal health care providers; provide access to critical goods and services such as healthy foods, supplies, including menstrual products and breast pumps; and provide referrals to community based resources such as health care providers. Importantly, the bill also requires insurance coverage to be provided during pregnancy and the postpartum period to ensure continuity of care if the person is released or transferred which has been shown to improve health outcomes.

Restraining pregnant people [poses serious health risks](#) to patients. As does depriving individuals who can become pregnant from resources that help ensure their overall health, dignity, economic security, and well-being. Articulating standards that recognize human rights, including for those most marginalized like pregnant people who are incarcerated, is critical. As physicians who believe in ending discriminatory practices so all of our patients are able to get the care they deserve, we strongly support this bill.

Lastly, [the Maternal Health and Health Care Providers Act](#), would directly improve conditions for the maternity care workforce by requiring a health care provider to be reimbursed at the same rate for maternal care regardless of who provides that care. The bill would also require all licensed health care providers to implement best practices for interprofessional collaboration thereby improving the integration of Direct-Entry Midwives as well as improving recruitment and retention. In addition, the bill recognizes that increasing accountability through improved data, including reporting of disrespect and mistreatment of pregnant people is essential. As physicians we know that accurate data is critical in order to address health inequities, improve transparency, and confront the maternal mortality crisis.

As physicians working on the front lines during the COVID-19 pandemic we understand that the current health crisis is only exacerbating existing maternal health disparities and increasing the need for the proactive policies included in this critical legislative package. [A study published in the American Journal of Obstetrics and Gynecology](#) on February 16, 2021 found that the COVID-19 infection rate in pregnant people was 70 percent higher than similarly aged adults. And research continually [shows](#) that Black and Brown communities are being disproportionately harmed by COVID-19.

Sex, pregnancy, and birth are not going to stop during the pandemic and neither is the maternal health crisis. The policies put forth in Colorado's Birth Equity Package are essential to addressing the maternal mortality crisis and addressing existing health inequities and systemic racism in our health care system. We urge the Colorado legislature to act quickly on these important bills.

Sincerely,

Dr. Jamila Perritt

Jamila Perritt, MD, MPH, FACOG
President & CEO
Physicians for Reproductive Health